FORM D



UNETED STATES SECURITIES ÀND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

133994

OMB APPROVAL

OND APPROVAL

OMB Number: Expires: 3235-0076 April 30, 2008

Estimated average burden

hours per form18

| SEC USE ONLY | | | | | | |
|---------------|-----|--------|--|--|--|--|
| Prefix | | Serial | | | | |
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| DATE RECEIVED | | | | | | |
| | | | | | | |

| Name of Offering ([] check if this is an ame | ndment and name has chang | ed, and indicate c | hange.) | • | |
|--|----------------------------|--------------------|---------------------------|--------------------|---------------|
| Crossing Automation, Inc. Series A Prefer | red Stock Financing | | | | |
| Filing Under (Check box(es) that apply): | [] Rule 504 | [] Rule 505 | [X] Rule 506 | []Section 4(6) | [] ULOE |
| Type of Filing: [] New Filing | [X] Amendment | | | | |
| | A. BASIC IDE | NTIFICATION | DATA | | |
| 1. Enter the information requested about t | he issuer | | | | |
| Name of Issuer ([] check if this is an amend | lment and name has changed | l, and indicate ch | ange.) | | |
| Crossing Automation, Inc. | | | | | |
| Address of Executive Offices | (Number and Street, City, | State, Zip Code) | Telephone Number (I | ; 0708 | 1064 |
| 2751 Marine Way, Mountain View, CA S | 94043 | | (650) 210-8391 | | |
| Address of Principal Business Operations (if different from Executive Offices) | (Number and Street, City, | State, Zip Code) | Telephone Number (I | ncluding Area Code |) |
| | | 0 | LICOTOGED | , | |
| Brief Description of Business | • | | OCT A Lass / | / | |
| Equipment for manufacturing semicond | uctors | | OCT 3 1 2007 P | | |
| Type of Business Organization [X] corporation [] business trust | [] limited partnershi | • | THOMSON FINANCIAL | other (please spec | cify): |
| • | N | Ionth Ye | ear | | |
| Actual or Estimated Date of Incorporation or | Organization: | [08] | 004] | [X] Actual | [] Estimated |
| Jurisdiction of Incorporation or Organization | • | | ice abbreviation for Stat | e: | |
| | CN for Canada; | FN for foreign ju | risdiction) | | [DE] |

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition, of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

| Check Box(es) that Apply: | [] Promoter [X] Beneficial Owner | [X] Executive Officer | [X] Director |
|---------------------------------------|--|---------------------------------|--------------|
| check Box(cs) that rippiy. | [] General and/or Managing Partner | [As] Excedit of Officer | [A] Director |
| Full Name (Last name first, if ind | | | |
| Keller, Jed | | | |
| | Sumber and Street, City, State, Zip Code) | | |
| 2751 Marine Way, Mountain \ | | | |
| Check Box(es) that Apply: | Promoter [] Beneficial Owner | [] Executive Officer | [X] Director |
| Full Name (Last name first, if ind | [] General and/or Managing Partner | | |
| Myhre, Todd | vidual) | | |
| | Sumber and Street, City, State, Zip Code) | | |
| 2751 Marine Way, Mountain | | | |
| Check Box(es) that Apply: | [] Promoter [X] Beneficial Owner | [X] Executive Officer | [X] Director |
| | [] General and/or Managing Partner | | |
| Full Name (Last name first, if ind | ividual) | | |
| Price, JB | | | |
| | Number and Street, City, State, Zip Code) | | |
| Check Poy(ee) that Apply | | [] Executive Officer | [V] Director |
| Check Box(es) that Apply: | [] Promoter [] Beneficial Owner [] General and/or Managing Partner | [] Executive Officer | [X] Director |
| Full Name (Last name first, if ind | | | |
| Pavlov, George | | | |
| | Number and Street, City, State, Zip Code) | | |
| 635 Waverley Street, Palo Alto | | | |
| Check Box(es) that Apply: | [] Promoter [X] Beneficial Owner | [X] Executive Officer | [] Director |
| | General and/or Managing Partner | | |
| Full Name (Last name first, if ind | ividual) | | |
| Dulmage, Laurence | Number and Street, City, State, Zip Code) | | |
| 2751 Marine Way, Mountain | | | |
| Check Box(es) that Apply: | Promoter Beneficial Owner | [X] Executive Officer | [] Director |
| | [] General and/or Managing Partner | [11] <u>Entouring</u> Critical | [] 5 |
| Full Name (Last name first, if ind | | | |
| Cohn, Peter | | ···· | |
| | Number and Street, City, State, Zip Code) | • | |
| 1020 Marsh Road, Menlo Park, | | (17) | |
| Check Box(es) that Apply: | [] Promoter [X] Beneficial Owner [] General and/or Managing Partner | [] Executive Officer | [] Director |
| Full Name (Last name first, if ind | | | |
| Intel Capital Corporation | · | | |
| | Number and Street, City, State, Zip Code) | | |
| | i, M/S RN6-46, Santa Clara, CA 95052 | | |
| Check Box(es) that Apply: | [] Promoter [X] Beneficial Owner | [] Executive Officer | [] Director |
| · · · · · · · · · · · · · · · · · · · | [] General and/or Managing Partner | | |
| Full Name (Last name first, if ind | ividual) | | |
| Tallwood II Partners, L.P. | Number and Street, City, State, Zip Code) | | |
| 635 Waverley Street, Palo Alto | | | |
| Check Box(es) that Apply: | Promoter [X] Beneficial Owner | [] Executive Officer | [] Director |
| | General and/or Managing Partner | () | [] |
| Full Name (Last name first, if ind | | | |
| Tallwood II, L.P. | | | |
| | Number and Street, City, State, Zip Code) | | |
| 635 Waverley Street, Palo Alto | o, CA 94301 | | |
| | (Use blank sheet, or copy and use additional copies | s of this sheet, as necessary.) | |
| | | | |

| • | | | | В | . INFO | RMAT | ion a | BOUT (| OFFER | ING | | • | | | ···· |
|------|---|----------------------------|----------------------|----------------------------|-------------------------|----------------------------|----------------------------|---------------------------------------|---|--------------------------|---------------------------------------|-------------------------------|----------------------|--------------|-------------|
| 1. | Has the issue | r sold, or c | loes the iss | | | | | | offering?. ng under U | | | | | Yes | No [X] |
| 2. | What is the n | ninimum ii | nvestment | that will b | e accepted | from any | individual' | ? | | | ••••• | | | \$ <u>NO</u> | NE |
| 3. | Does the offe | ring perm | it joint ow | nership of | a single un | nit? | ••••• | | | | | | | Yes | No [X] |
| 4. | Enter the information agent of a brobe listed are | for solicit oker or dea | tation of p | urchasers i red with th | n connecti ne SEC an | ion with sa d/or with a | les of secu state or st | ırities in th tates, list th | ie offering. ne name of | If a perso the broker | on to be lis r or dealer | ited is an as . If more th | ssociated | persor | |
| Full | Name (Last n | ame first, i | f individu | al) | _ | | | | | | | | | | |
| Bus | iness or Resid | ence Addre | ess (Numb | er and Stre | et, City, S | tate, Zip C | ode) | | | | | | · | | |
| Nan | ne of Associat | ed Broker | or Dealer | | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| Stat | es in Which P | erson Liste | d Has Soli | cited or In | tends to Si | olicit Purch | asers | | | | | | | | |
| | | | | | | | | • | | | | - | | | |
| | | | | | - | | | | | | | | | All Stat | es |
| | [AL] (IL] (MT] | [AK] [IN] [NE] | [AŻ] [IA] [NV] | [AR] [KS] [NH] | [CA] [KY] [NJ] | [CO] [LA] [NM] | [CT] [ME] [NY] | [DE] [MD] [NC] | [DC] [MA] [ND] | [FL] Mi] {OH] | [GA] [MN] [OK] | [HI] MS] [OR] | [ID] [MO] [PA] | | |
| | [RI] | [SC] | [SD] | [TN] | [TX] | [UT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] | | |
| | Name (Last n | | | | | | | | | • | | | | | |
| Bus | iness or Resid | ence Addre | ess (Numb | er and Stre | et, City, S | tate, Zip C | ode) | | | | | | | | |
| Nan | ne of Associat | ed Broker | or Dealer | · | | | | | | | ·-··· | | | | |
| Stat | es in Which Pe | erson Liste | d Has Soli | cited or In | tends to Se | olicit Purch | asers | | ·-··· | | | | | | • "- |
| | (Check | "All States | or check | individua | l States) | | | | ************** | ····· | | ••••• | []/ | All Stat | es |
| | [AL] | [AK] | [AZ] | [AR] | [CA] | [CO] | [CT] | [DE] | [DC] | [FL] | [GA] | [HI] | [ID] | | |
| | [IL] [MT] | [IN] [NE] | [IA] [NV] | [KS] [NH] | [KY] [NJ] | [LA] [NM] | [ME] [NY] | [MD] [NC] | [MA] [ND] | [MI] [OH] | [MN] [OK] | (MS] [OR] | [MO] [PA] | | |
| Full | [RI] Name (Last n | [SC] ame first, i | [SD] if individu | [TN] | [TX] | [บT] | [VT] | [VA] | [WA] | [WV] | [WI] | [WY] | [PR] | | |
| | iness or Resid | | | | ot City C | toto Zin C | ada) | | | | | | | | |
| | | | | | | tate, zip c | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| -Nan | ne of Associat | ed Broker | or Dealer | | | | | | | | | | | | |
| Stat | es in Which P | erson Liste | d Has Soli | cited or In | tends to Se | olicit Purch | nasers | | | | | | | | |
| | (Check | "All States | " or check | individua | l States) | | | ••••• | *************************************** | ••••• | | | [] | All Stat | es |
| | [AL] [IL] | [AK] [IN] | [AZ] [IA] | [AR] [KS] | [CA] [KY] | [CO] [LA] | [CT] [ME] | [DE] [MD] | [DC] [MA] | [FL] | [GA] | [HI] | [ID] | | |
| | [MT] [RI] | [NE] [SC] | [NV] [SD] | [NH] [TN] | [NJ] [TX] | [LA] [NM] [UT] | [NY] [VT] | [NC] [VA] | [MA] [ND] [WA] | [MI] [OH] [WV] | [MN] [OK] [WI] | [MS] [OR] [WY] | [MO] [PA] [PR] | | |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

| | amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. | | • |
|----|--|-----------------------------|--------------------------------------|
| | Type of Security | Aggregate Offering Price | Amount Already Sold |
| | Debt | \$ | 5 |
| | Equity | \$3,116,359.00 | \$3,116,359.00 |
| | [Common [X] Preferred | <u>.</u> | 4 5 |
| | Convertible Securities (including warrants) | 2 | \$ |
| | Partnership Interests | 3 | \$ |
| • | Other (Convertible Promissory Notes) | 52 116 350 00 | \$ |
| | | \$3,116,359.00 | \$3,116,359.00 |
| _ | Answer also in Appendix, Column 3, if filing Under ULOE | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | | |
| | | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | <u> </u> | \$3,116,359.00 |
| | Non-accredited Investors | | \$ |
| | Total (for filings Under Rule 504 Only) | | \$ |
| | Answer also in Appendix, Column 4 if filing under ULOE | | <u> </u> |
| 3. | If this filing is for an offering Under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1. | | |
| | Type of Security | Type of Security | Dollar Amount Sold |
| | Rule 505 | | S |
| | Regulation A | | \$ |
| | Rule 504 | | <u> </u> |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate | | - |
| | Transfer Agent's Fees | [] | \$ |
| | Printing and Engraving Costs | [] | S |
| | Legal Fees (estimated) | [X] | \$25,000.00 |
| | Accounting Fees | | \$ |
| | Engineering Fees | [] | |
| | Sales Commissions (Specify finder's fees separately) | | \$ |
| | Other Expenses (identify): | | \$ |
| | Total | מעז | |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C – Question 4.a. This difference is the "adjusted gross proceeds to the issuer." | | \$3,091,359.00 |
|---|--|--------------------|
| Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above. | | |
| | Payments to Officers, Directors, & Affiliates | Payments To Others |
| Salaries and fees | . \$[] | \$ |
| Research and Development | s [] | S |
| Purchase, rental or leasing and installation of machinery and equipment | \$ [] | s |
| Construction or leasing of plant buildings and facilities | \$[] | \$ |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets of securities of another | | |
| issuer pursuant to a merger) | \$[] | <u> </u> |
| Repayment of indebtedness | \$ [] | \$ |
| Working capital and general corporate purposes [] | \$[X] | \$3,091,359.00 |
| Other (specify): [] | \$[] | S |
| Column totals | \$[] | s |
| Total payments listed (column totals added) | [X] \$ <u>3,091,359.00</u> | _ |

5.

| . · |). FEDERAL SIGNATURE | |
|--|--|--|
| The issuer has duly caused this notice to be signed by the undersign constitutes an undertaking by the issuer to furnish to the U.S. Securithe issuer to any non-accredited investor pursuant to paragraph (b)(i | ities and Exchange Commission, upon written request of | Rule 505, the following signature of its staff, the information furnished by |
| lssuer (Print or Type) Crossing Automation, Inc. | Signature | Date 10/17/07 |
| Name of Signer (Print or Type) Peter Cohn | Title of Signer (Print or Type) Assistant Secretary | |

Attention

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNA | TURE | | | | | | |
|--|---|--|------------------------------|--|--|--|--|--|
| 1. | . Is any party described in 17 CFR 230.262 presently subject to any of the disqual rule? | meation provisions of seen | Yes No | | | | | |
| | See Appendix, Column 5, for s | tate response. | | | | | | |
| 2. | 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFI 239.500) at such times as required by state law. | | | | | | | |
| 3. | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees. | | | | | | | |
| 4. | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied. | | | | | | | |
| | The issuer has read this notification and knows the contents to be true and has duly cand the suthorized person. | used this notice to be signed on its beh | nalf by the undersigned duly | | | | | |
| | ssuer (Print or Type) Crossing Automation, Inc. | Valoria de la companya della company | Date 10/17/07 | | | | | |
| Name of Signer (Print or Type) Peter Cohn Title of Signer (Print or Type) Assistant Secretary | | | | | | | | |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed orprinted signatures.

| | | | | Al | PPENDIX | | | · | :- |
|-------|---|---------------------------|--|--------------------------------------|--|--|---------------------------------------|--------------|--|
| 1 | 2 | <u></u> | 3 | | Type of investor and amount purchased in State (part C-Item 2) | | | | |
| | Intend To r accre investors (Part B | ion- dited in State | Type of Security and aggregate offering price offered in state (Part C-Item 1) | | | | | | |
| State | Yes | No | Series A Preferred Stock | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| AL | | | | | | | | | |
| AK | | - | | ı | | | | | |
| AZ | | | | | | | | | |
| AR | | | | | | | | | |
| CA | | X | \$3,116,359.00 | 8 | \$3,116,359.00 | | | | х |
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| , | APPENDIX | | | | | | | | | | |
|-------|---|-----------------------------|---|--------------------------------------|--|---|---------------|----------|----|--|--|
| 1 | 2 | 2 | 3 | | Type of investor and amount purchased in State (part C-Item 2) | | | | | | |
| | Intend To r accre investors (Part B | ion- dited s in State | Type of Security and aggregate offering price offered in state (Part C-Item 1) | | | | | | | | |
| State | Yes | No | Series A Preferred Stock | Number of Accredited Investors | Accredited Non-Accredited | | | Yes | No | | |
| NH | | | | | | | | | | | |
| NJ | | | | | | | | | | | |
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